

Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

Commonwealth	***
Massachusetts	<u> </u>
ile with: City or Town Clerk or Election Commission Please print or type all information	0 mm
Fill in dates: Reporting Period Beginning Jan 1 2011	Ending Oct, 3.1. 2011
Type of report: (Check one) □ 8th day preceding preliminary □ 8th day preceding election □ 30	0 day after election □year-end report □dissolution
Full Name of Candidate (if applicable) SCNOOL COMNIHER Office Sought and District OFrederickson Dr. Residential Address Pandolph, Ma 02368 781-965-1944 Tel. No. (optional)	Committee To Olect ABD) ITSKA Committee Name LADYA QU Name of Committee Treasurer Sedevickson Drive Committee Mailing Address The Committee Mailing Address Tel. No. (optional)
SUMMARY BALANCE II	NFORMATION:
Line 1: Ending balance from previous Line 2: Total receipts this period (page 2 Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period Line 7: Total (all) outstanding liabilities Line 8: Name of bank(s) used	2, line 11) \$ \$0.00 \$ 40.00 (page 3, line 14) \$ H0.00 period (page 4) \$
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the campaign finance activity, including all contributions, loans, receipts, expenditures, di and represents the campaign finance activity of all persons acting under the authority M.G.L. c. 55. Signed under the penalties of perjuit	y or on behalf of this committee in accordance with the requirements of
Treasurer's signature (in ink)	Date / 6/32 / 8.8. //
FOR CANDIDATE FILINGS ONLY: (C	ANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the campaign finance activity, of all persons acting under the authority or on behalf of have not received any contributions, incurred any liabilities nor made any expenditure. Candidate without Committee OR Candidate with independent activity filing. I certify that I have examined this report including attached schedules and it is, to the campaign finance activity, including contributions, loans, receipts, expenditures, dis and represents the campaign finance activity of all persons acting under the authority M.G.L. c. 55. Signed under the penalties of personal distributions.	separate report the best of my knowledge and belief, a true and complete statement of all shursements, in-kind contributions and liabilities for this reporting period by or on behalf of this committee in accordance with the requirements of
Character and album a (co. mont)	}

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

number on ea Date Received	Name and Residential Address (alphabetical listing required)	Amou	unt	Occupation & Employer (for contributions of \$200 or more	
10/15/11	Column D Hudson	(p) 20.	۴-		
16/15/11	Grederickson Dr. Rando Corolyn m. parter 44 6 berty St. Randolph	70.	<u> </u>		
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,					
Line 9:	Total receipts in excess of \$50 (or listed above)	40	00		
	Total receipts \$50 and under* (not listed above)				
Line 11: 7	FOTAL RECEIPTS IN THE PERIOD	140 (<i>00</i>	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
				-
	:			
,				
		·		
-				
				·
	-	······································	Expenditures over \$50	
E	nter on page 1, line 4		Expenditures \$50 and under* FOTAL EXPENDITURES	-

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received	Residential Address	Description of Contribution	Value
				<u> </u>
		·		•
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
-				
	:	`.		
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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